

F19000001791

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

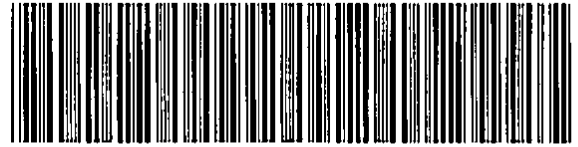
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FL

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: **TRUE PREFERENCES, INC.**

Name of Corporation

DOCUMENT NUMBER: **F19000001791**

The enclosed *Affidavit by Foreign Corporation to Change/Add Officer(s) and/or Director(s)* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

ALLEN LICHT

Name of Contact Person

ROBERT S. SHAPIRO and ASSOCIATES, PA

Firm/Company

1594 Shoreline Way

Address

Hollywood, FL 33019

City/State and Zip Code

allen@robertshapirolaw.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Allen Licht

Name of Contact Person

at (**800**) **770-9883 ext 3**

Area Code & Daytime Telephone Number

Enclosed is a check made payable to the Florida Department of State for the following amount:

☒ \$35.00 Filing Fee

☐ \$43.75 Filing Fee &
Certificate of Status

☐ \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed)

☐ \$52.50 Filing Fee,
Certificate of Status &
Certified Copy
(Additional copy is
enclosed)

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

**AFFIDAVIT BY FOREIGN CORPORATION TO CHANGE/ADD OFFICER(S)
AND/OR DIRECTOR(S)**

(Note: Applicable only during the first calendar year of qualification)

1. The name of the foreign corporation as it appears on the records of the Florida Department of State is:
TRUE PREFERENCES, INC.
2. This entity was authorized to transact business in Florida on 04/11/2019 and its Florida document number is F19000001791
3. This corporation was formed under the laws of State of Delaware
4. The name and address of each officer and/or director is as follows:

Title:

CHAIRMAN

Name and Address

Alexander Zatvan

777 BRICKELL AVE, SUITE 500
MIAMI, FL 33131

PRESIDENT

DMITRI KRYJANOVSKI

777 BRICKELL AVE, SUITE 500
MIAMI, FL 33131

TREASURER

DMITRI KRYJANOVSKI

777 BRICKELL AVE, SUITE 500
MIAMI, FL 33131

SECRETARY

DMITRI KRYJANOVSKI

777 BRICKELL AVE, SUITE 500
MIAMI, FL 33131

(Attach additional pages if necessary)



Signature of an officer or director

DMITRI KRYJANOVSKI

Typed or printed name of person signing

President

Title of person signing

FILING FEE \$35

Make checks payable to Florida Department of State and Mail to:
Division of Corporations • PO Box 6327 • Tallahassee, FL 32314